

# Promise Form and Gift Aid Declaration

SOUTHWELL MINSTER

*The Cathedral and Parish Church  
of the Blessed Virgin Mary*

**I should like to give / I am unable to give / Giving unchanged**

*(Please circle as appropriate)*

**Name** .....  
*(Capitals) Title Forenames Surname*  
*(If you are giving through Gift Aid, please enter only one person's name above)*

**Address** .....  
.....  
..... **POST CODE** .....

**I should like to give**  **Each** Week / Month / Quarter/  
**I choose to give by :-** Half Year / Year.

- Bank Standing Order  
 Offering Envelopes  
 Other (Please specify) .....

Tick below

*giftaid it*

**(Tick box for us to reclaim tax on all donations)**

**Please treat as Gift Aid donations all qualifying gifts of money made from the date of this declaration and in the past four years, currently 25p for every £1 donated.** I am a UK taxpayer and understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference.

Please notify the Treasurer / Planned Giving Secretary if you want to cancel this declaration, change your name or home address or no longer pay sufficient tax on your income and /or capital gains.

Signature..... Date .....

**I have arranged the Bank Standing Order payments by phone or internet banking, and these payments will start on .....**

**There is no change to my existing Bank Standing Order payments**

# Standing Order Form for Southwell Minster

Please complete this form only if there is **any change** to the amount you wish to give.

To the Manager.....Bank plc.,

Address .....

.....

.....Post Code.....

**Account Number** \_\_\_\_\_ **Sort Code** \_ - \_ -

Name of Accountholder(s).....

Address .....

.....Postcode.....

**Please pay to:**

**National Westminster Bank plc,  
Southwell Branch, 9 Church Street, Southwell, Notts. NG25 0HW**

**A/C Name: Southwell Cathedral Chapter Number Two Account**

**Account Number 60707399 Sort Code 60-20-15**

**Monthly Quarterly Half Yearly Yearly** payments of :-

*(Please circle preference)*

**£..... (.....pounds .....p)**

Starting on the ..... day of .....20.....  
and continue these payments until further notice.

*(Please choose a start date at least one month from today to allow time for processing)*

**Date..... Signed.....**

**This Standing Order replaces any existing Standing Order payable to the same recipient with effect from the above starting date.**